OFFICIAL FILE

MAL COMPLAINT

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701 For Commission Use Only:

ORIGINAL

| Regarding a complaint by (Person making the complaint): Carole Grant Hall |
|--|
| Against (Utility name): SBC Long Distance, LLC d/b/a SBC Jang Distance |
| As to (Reason for complaint) $\underline{Z} \subset \underline{Complaint} \ \underline{ZO} \ 2005-179255$ |
| Call Controll service didn't not Direct out going |
| Calls as describe by SBC. I poid & Chase the Service tecruse in Ohica, 90 Minois. |
| TO THE ILLINOIS COMMERCE COMMISSION. SPRINGFIELD, ILLINOIS: My mailing address is 76/0 S. Ridgeland Chicago, IL 6~49 |
| The service address that I am completining at ut is 7610 5. Ridgeland 40 IC 60649 |
| My home telephone is 773 – 768 – 4557 Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at 173 – 905 – 8455 oR 773 – 488 – 200 9 |
| (Full name of utility company) (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act. |
| In the space below, list the specific section of the law, Commission rule(s), σ utility tariffs that you think is involved |
| See Atlacked Service 677ered that don't went |
| ER 1 |
| SO D SS |
| Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint? |
| Has your complaint, filed with that office, been closed? |

| lease state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed. |
|---|
| See Attacked |
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| en e |
| i consigni su caso e i gretistament di qui ser pro cui no fort preparent una estima a produce di considera di |
| Please clearly state what you want the Commission to do in this case: |
| Credit for the Disternational Galls are as as Drustill |
| Date Complainant's Signature Complainant's Signature |
| If an attorney will represent you. please give the <code>Bttprney</code> 's name, address. and telephone <code>number</code> |
| You need to file the original with the Commission. Also. provide one copy for each utility complained about (referred to as respondents). |
| VERIFICATION |
| A notary public must witness the completion of this part of the form. |
| first being duly sworn. say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge |
| (Signature) |
| Motary Public, Minois "OFFICIAL SEATING |

NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.

Icc207/07